Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued are identification (for	George First name	First name
	exar	mple, your driver's use or passport).	H	Middle con
		g your picture	Middle name	Middle name
	iden	tification to your ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
	maid assu	ide your married or den names and any imed, trade names and g business as names.		
	any such parti	NOT list the name of separate legal entity n as a corporation, nership, or LLC that is illing this petition.		
3.	you num Indi	the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-4382	

De	btor 1 George H Kouria	balis	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.		
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1032 Bette Lane	
		Glenview, IL 60025 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Re</i>		.C. § 342(b) for Individ	uals Filing for Bankruptcy		
	choosing to file under	☐ Chap	,,	3	9	.,, .,				
		☐ Chap	oter 11							
		☐ Chap	oter 12							
		■ Chap	oter 13							
8.	How you will pay the fee	■ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.								
		☐ In	eed to pay	the fee in instal		e this option, sigr	and attach the Applic	ation for Individuals to Pay		
		☐ Ir	equest that t is not req	nt my fee be waiv uired to, waive yo	ur fee, and may do so	only if your inco	me is less than 150%	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out		
							m 103B) and file it with			
9.	Have you filed for bankruptcy within the	□ No.								
	last 8 years?	■ Yes.								
			District	NDIL	When	9/18/24	Case number	24-13749		
			District		When		Case number			
			District		When		Case number			
10.	Are any bankruptcy cases pending or being	■ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
			Debtor				Relationship to	you		
			District		When		Case number, if	known		
			Debtor				Relationship to	you		
			District		When		Case number, if	known		
11.	Do you rent your	■ No.	Go to I	ine 12.						
	residence?	☐ Yes.	Has yo	our landlord obtain	ed an eviction judgm	ent against you?				
			No. Go to line 12.							
				No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as part of this bankruptcy petition.						

Case number (if known)

Debtor 1 George H Kouriabalis

Deb	otor 1 George H Kouriab	oalis			Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Ow	n as a Sole Proprieto	or	
	Are you a sole proprietor of any full- or part-time business?	■ No.		Part 4.		
	business:	☐ Yes.	Name	Name and location of business		
	A sole proprietorship is a	— 100.				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	ber, Street, City, State	e & ZIP Code	
	it to this petition.		Chec	k the appropriate box	to describe your business:	
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor?</i> For a definition of <i>small</i>	deadline	s. If you ins, cash-f	ndicate that you are a flow statement, and fe	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure set 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and dunder Subchapter V of Chapter 11.	
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11.	
Par	t 4: Report if You Own or	· Have Any	/ Hazard	ous Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety?	□ 163.	What is	the hazard?		
	Or do you own any property that needs immediate attention?			diate attention is , why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	is the property?		
					Number, Street, City, State & Zip Code	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Der	tor 1 George H Kourian	alis		Case Hull	nber (if known)				
Par	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	individual primarily for a pe	consumer debts? Consumer debts are described amily, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	6b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe that are not consumer debts or business debts						
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.		. Do you estimate that after any exempt p available to distribute to unsecured credito	roperty is excluded and administrative expenses ors?				
	administrative expenses		□ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	□ 50,001-100,000				
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000				
19.	How much do you	□ \$0 - \$		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		01 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
		\$500,001 - \$1 million		□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
20.	How much do you estimate your liabilities	\$0 - \$		\$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	to be?		001 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion				
		_ ` `	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
Par	7: Sign Below								
For	you	I have ex	camined this petition, and I de	eclare under penalty of perjury that the in	formation provided is true and correct.				
		If I have United S	chosen to file under Chapter tates Code. I understand the	7, I am aware that I may proceed, if eligil e relief available under each chapter, and	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.				
				d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b)					
		I request	relief in accordance with the	e chapter of title 11, United States Code, s	specified in this petition.				
			cy case can result in fines up		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
		George	rge H Kouriabalis H Kouriabalis e of Debtor 1	Signature of De	btor 2				
		Executed	d on May 22, 2025	Executed on					
			MM / DD / YYYY		MM / DD / YYYY				

For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	ledge after an inquiry that the information in the
	/s/ John P. Wonais	Date	May 22, 2025
	Signature of Attorney for Debtor		MM / DD / YYYY
	John P. Wonais Printed name		
	Wonais Law, LLC		
	· ·····		
	11070 S. Western Ave.		
	STE 9		
	Chicago, IL 60643		
	Number, Street, City, State & ZIP Code		
	Contact phone 3128835422	Email address	john@wonaislaw.com

Case number (if known)

Debtor 1 George H Kouriabalis

6225222 IL Bar number & State

Fill	in this inforr	nation to identify your	case:			
Del	otor 1	George H Kourial	balis			
Del	otor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_	se number _				_	ck if this is an nded filing
Su Be a	mmary cas complete a rmation. Fill	and accurate as possib out all of your schedul	ole. If two married people es first; then complete th	d Certain Statistical Information are filing together, both are equally responsible for e information on this form. If you are filing amend the box at the top of this page.		
		arize Your Assets				
						assets of what you own
1.		/B: Property (Official Fo e 55, Total real estate, f			\$	800,000.00
	1b. Copy lin	e 62, Total personal pro	perty, from Schedule A/B		\$	14,600.00
	1c. Copy lin	e 63, Total of all property	y on Schedule A/B		\$	814,600.00
Par	t 2: Summ	arize Your Liabilities				
						liabilities nt you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 of Schedule D	\$	595,863.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	57,944.00
				Your total liabilities	\$	653,807.00
Par	t 3: Summ	arize Your Income and	Expenses			
4.		Your Income (Official Foombined monthly incom	,	<i>I</i>	\$	7,948.00
5.		Your Expenses (Official nonthly expenses from li			\$	6,197.15
Par	t 4: Answe	er These Questions for	Administrative and Stati	stical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. Ch	neck this box and submit this form to the court with yo	ur other so	chedules.
7.	■ Yes What kind	of debt do you have?				
				lebts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,195.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	rmation to identify y						
Debtor 1	George H Kou		Name	Last Name			
Debtor 2							
(Spouse, if filing)	First Name	Middle	Name	Last Name			
Jnited States B	Bankruptcy Court for th	ne: NORTHER	N DISTI	RICT OF ILLINOIS			
Case number							☐ Check if this is an amended filing
Official Fo	orm 106A/B						·
Schedu	le A/B: Pro	pertv					12/15
	e Each Residence, Buil			Estate You Own or Have an Interest In ence, building, land, or similar property?			
■ No. Go to Pa ■ Yes. Where	art 2.						
Yes. Where	e is the property?		What	is the property? Check all that apply			
Yes. Where	e is the property?	ption	What ■ □	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amoun	t of any secured	aims or exemptions. Put d claims on Schedule D: ns Secured by Property.
Yes. Where 1.1 1032 Bet Street address	e is the property? tte Ln. is, if available, or other descri	ption 60025-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amoun Creditors V	t of any secure Who Have Clain alue of the	d claims on Schedule D: ns Secured by Property. Current value of the
Yes. Where	e is the property? tte Ln. is, if available, or other descri		-	Single-family home Duplex or multi-unit building Condominium or cooperative	Current va	t of any secure Who Have Clain alue of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
Yes. Where 11 1032 Bet Street address	tte Ln. s, if available, or other descri	60025-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current va entire pro \$80 Describe t (such as fo	t of any secured who Have Clain alue of the perty? 00,000.00 the nature of yee simple, tens	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$800,000.00 our ownership interest
Yes. Where	tte Ln. s, if available, or other descri	60025-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire pro \$80 Describe t (such as f a life estate	t of any secured who Have Claim alue of the perty? 00,000.00	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$800,000.00 our ownership interest
Yes. Where	tte Ln. s, if available, or other descri	60025-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire pro \$80 Describe t (such as fo	t of any secured who Have Clain alue of the perty? 00,000.00 the nature of yee simple, tens	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$800,000.00 our ownership interest
Yes. Where 1 1032 Bet Street address Glenview City	tte Ln. s, if available, or other descri	60025-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire pro \$80 Describe t (such as f a life estat	t of any secured who Have Claim alue of the perty? 00,000.00 the nature of yee simple, tendete), if known.	current value of the portion you own? \$800,000.00 cur ownership interest ancy by the entireties, o
Yes. Where	tte Ln. s, if available, or other descri	60025-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current va entire pro \$80 Describe 6 (such as f a life estate TBE	t of any secured who Have Claim alue of the perty? 00,000.00 the nature of yee simple, tendete), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$800,000.00
Yes. Where 1.1 1032 Bet Street address Glenview City Cook	tte Ln. s, if available, or other descri	60025-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire pro \$80 Describe t (such as f a life estat TBE	t of any secured who Have Claim alue of the perty? 00,000.00 the nature of yee simple, tendete), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$800,000.00 our ownership interest ancy by the entireties, o

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debto	or 1 George H Kouriabalis	C	Case number (if known)	
3. Ca	rs, vans, trucks, tractors, sport utili	ty vehicles, motorcycles		
	•	·, · · · · · · · · · · · · · · · · · ·		
	No			
•	Yes			
3.1	Make: Infiniti	Who has an interest in the property? Check one		claims or exemptions. Put ured claims on Schedule D:
	Model: QX56	Debtor 1 only		laims Secured by Property.
	Year: 2010	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 1600		entire property?	portion you own?
	Other information:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$5,600.00	\$2,800.00
3.2	Make: Cadilac	Who has an interest in the property? Check one	the amount of any sec	claims or exemptions. Put ured claims on Schedule D:
	Model: CTS	Debtor 1 only	Creditors Who Have C	laims Secured by Property.
	Year: 2012	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 1150 Other information:	Debtor 1 and Debtor 2 only At least one of the debtors and another	entire property?	portion you own?
		At least one of the deptors and another		
		☐ Check if this is community property	\$5,500.00	\$5,500.00
		(see instructions)		
		u own for all of your entries from Part 2, including a		\$8,300.00
.pa	iges you have attached for Part 2. V	/rite that number here		Ψο,οσοίσο
Part 3	Describe Your Personal and Househ	old Items		
		le interest in any of the following items?		Current value of the
		•		portion you own? Do not deduct secured claims or exemptions.
Ex	usehold goods and furnishings kamples: Major appliances, furniture, I No	nens, china, kitchenware		
	Yes. Describe			
	used furnit	ıre		\$500.00
		•••		
Ex	including cell phones, camer	o, video, stereo, and digital equipment; computers, print as, media players, games	ers, scanners; music collec	ctions; electronic devices
	Yes. Describe			
	TVs Laptop			\$200.00
	aptop			
	llectibles of value			

☐ No

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

Debtor 1	George H Kour	abalis		Case number (if known)	
■ Yes	s. Describe				
	M	ovie Posters			\$100.00
Exam _l ■ No	ment for sports and I ples: Sports, photogra musical instrume s. Describe	ohic, exercise, and other	hobby equipment; bicycles, pool	tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No		notguns, ammunition, and	related equipment		
□ No		es, furs, leather coats, des	signer wear, shoes, accessories		
	U	sed Clothes			\$500.00
■ No □ Yes 13. Non-f Exan ■ No □ Yes 14. Any c ■ No	nples: Everyday jeweli s. Describe farm animals nples: Dogs, cats, bird s. Describe	s, horses ousehold items you did	gement rings, wedding rings, hei		gold, silver
			art 3, including any entries for		\$1,300.00
	Describe Your Financial Dwn or have any lega	Assets I or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Money you have	e in your wallet, in your ho	ome, in a safe deposit box, and c	on hand when you file your petit	ion
			ounts; certificates of deposit; sha s with the same institution, list ea		houses, and other similar
■ Yes	3		Institution name:		
	,	7.1. Checking	Fifth Third		\$0.00

Debtor 1	George H Kouriabalis		Case number	(if known)	
Exan	s, mutual funds, or publicly traded stocks nples: Bond funds, investment accounts with brokera	age firms, money market accounts	s		
■ No □ Yes	Institution or issuer nam	e:			
	publicly traded stock and interests in incorporate venture	ed and unincorporated busines	sses, including a	n interest in	an LLC, partnership, and
■ Yes	. Give specific information about them		% of ownersh	nip:	
	Exam Corp		100	%	\$0.00
Nego Non- No	rnment and corporate bonds and other negotiab stiable instruments include personal checks, cashiers negotiable instruments are those you cannot transfe . Give specific information about them Issuer name:	s' checks, promissory notes, and	money orders.		
Exan ■ No	ement or pension accounts apples: Interests in IRA, ERISA, Keogh, 401(k), 403(b	o), thrift savings accounts, or othe	er pension or profi	t-sharing plar	ns
⊔ Yes	. List each account separately. Type of account:	Institution name:			
Your <i>Exar</i>	rity deposits and prepayments share of all unused deposits you have made so that apples: Agreements with landlords, prepaid rent, publ				or others
■ No □ Yes		Institution name or individual:			
23. Annu II No	ities (A contract for a periodic payment of money to	you, either for life or for a numbe	er of years)		
	Issuer name and description.				
24. Intere 26 U.S I No	sts in an education IRA, in an account in a qualif s.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ied ABLE program, or under a	qualified state tu	iition progra	m.
	Institution name and description. Se	eparately file the records of any in	terests.11 U.S.C.	§ 521(c):	
■ No	s, equitable or future interests in property (other . Give specific information about them	than anything listed in line 1),	and rights or po	wers exercis	sable for your benefit
Exan ■ No	ts, copyrights, trademarks, trade secrets, and of opples: Internet domain names, websites, proceeds from the complex of the co		ments		
27. Lice n <i>Exan</i> ■ No	ses, franchises, and other general intangibles apples: Building permits, exclusive licenses, cooperate. Give specific information about them	ive association holdings, liquor lic	censes, professio	nal licenses	
Money o	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

De	ebtor 1	George H Kouriabalis Case number (if known	
28.	Tax ref	funds owed to you	
	■ No		
	☐ Yes.	Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family	y support	
	'	ples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, proper	y settlement
	■ No		
	⊔ Yes.	Give specific information	
30.		amounts someone owes you ples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' comp- benefits; unpaid loans you made to someone else	ensation, Social Security
	_	Give specific information	
31.		sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insura	ance
		Name the insurance company of each policy and list its value.	
		Company name: Beneficiary:	Surrender or refund value:
32.	If you	sterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to reone has died.	ceive property because
	_	Give specific information	
33.	Examp	s against third parties, whether or not you have filed a lawsuit or made a demand for payment ples: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	
		Potential Breach of Contract against HRSA	\$0.00
			· ·
34.	Other	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights	o set off claims
	■ No □ Yes.	Describe each claim	
25		nancial assets you did not already list	
JJ.	■ No	namolal assets you did not all eady list	
	☐ Yes.	Give specific information	
36		the dollar value of all of your entries from Part 4, including any entries for pages you have attached art 4. Write that number here	\$0.00
Pa	rt 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
		own or have any legal or equitable interest in any business-related property?	
		Go to line 38.	
	. 30.		
			Current value of the portion you own? Do not deduct secured

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

■ No

Debtor 1	George H Kouriabalis	Case number (if known)	
☐ Yes.	. Describe	_	
Exam	e equipment, furnishings, and supplies nples: Business-related computers, software, modems, printers, copiers, fax	machines, rugs, telephones, desks	, chairs, electronic devices
■ No □ Yes.	. Describe		
40. Machi □ No	inery, fixtures, equipment, supplies you use in business, and tools of y	our trade	
■ Yes	. Describe		
	Laboratory Equipment		\$5,000.00
41. Invent	tory		
■ No □ Yes.	. Describe		
42. Intere : ■ No	sts in partnerships or joint ventures		
	. Give specific information about them Name of entity:	% of ownership:	
43. Custo	omer lists, mailing lists, or other compilations		
☐ Do yo	our lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	■ No □ Yes. Describe		
	usiness-related property you did not already list		
■ No □ Yes.	. Give specific information		
	the dollar value of all of your entries from Part 5, including any entries Part 5. Write that number here		\$5,000.00
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have a you own or have an interest in farmland, list it in Part 1.	an Interest In.	
-	u own or have any legal or equitable interest in any farm- or commerci	al fishing-related property?	
	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List A	above	
53. Do yo <i>Exam</i>	ou have other property of any kind you did not already list? Apples: Season tickets, country club membership		
■ No	. Give specific information		
54. Add	the dollar value of all of your entries from Part 7. Write that number he	re	\$0.00

Debtor 1 George H Kouriabalis Case number (if known) List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$800,000.00 56. Part 2: Total vehicles, line 5 \$8,300.00 57. Part 3: Total personal and household items, line 15 \$1,300.00 58. Part 4: Total financial assets, line 36 \$0.00 59. Part 5: Total business-related property, line 45 \$5,000.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$14,600.00 Copy personal property total \$14,600.00

Fill	in this info	rmation to identify your	case:		
De	btor 1	George H Kourial	palis		
		First Name	Middle Name	Last Name	
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name	
Uni	ited States I	Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Ca	se number				
	nown)				☐ Check if this is an
					amended filing
Of	ficial F	orm 106C			
Sc	chedu	le C: The Pro	operty You Cla	im as Exempt	4/25
			<u> </u>	•	
the nee	property you	ulisted on <i>Schedule A/B: F</i> and attach to this page as i	Property (Official Form 106A/B)	g together, both are equally responsible for as your source, list the property that you mail Page as necessary. On the top of any	ı claim as exempt. If more space is
	•	,	exempt, you must specify th	e amount of the exemption you claim.	One way of doing so is to state a
spe	cific dollar	amount as exempt. Alter	natively, you may claim the	full fair market value of the property be health aids, rights to receive certain	eing exempted up to the amount of
fund	ds—may be	unlimited in dollar amou	unt. However, if you claim an	exemption of 100% of fair market value	ue under a law that limits the
		i particular dollar amount le statutory amount.	and the value of the proper	ty is determined to exceed that amour	it, your exemption would be limited
Pai	rt 1: Ider	tify the Property You Cla	im as Exempt		
1.	Which set	of exemptions are you cl	laiming? Check one only, eve	n if your spouse is filing with you.	
	■ You are	claiming state and federal	nonbankruptcy exemptions.	11 U.S.C. § 522(b)(3)	
	☐ You are	claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)		
2.	For any pr	operty you list on Sched	ule A/B that you claim as exe	empt, fill in the information below.	
		ption of the property and line /B that lists this property	e on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		,	Copy the value from Schedule A/B	Check only one box for each exemption.	
	4000 D-11	- I Ol II 000			705 11 00 5/40 440

Schedule A/B that lists this property	portion you own			
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
1032 Bette Ln. Glenview, IL 60025 Cook County	\$800,000.00		\$438,078.00	735 ILCS 5/12-112
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2012 Cadilac CTS 115000 miles Line from Schedule A/B: 3.2	\$5,500.00		\$2,400.00	735 ILCS 5/12-1001(c)
Life from Schedule A.B. 3.2			100% of fair market value, up to any applicable statutory limit	
2012 Cadilac CTS 115000 miles Line from Schedule A/B: 3.2	\$5,500.00		\$3,100.00	735 ILCS 5/12-1001(b)
Line nom Schedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	
used furniture Line from Schedule A/B: 6.1	\$500.00		\$0.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/B. V. I			100% of fair market value, up to any applicable statutory limit	
TVs Laptop Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line Holli Schedule Arb. 1-1			100% of fair market value, up to any applicable statutory limit	

De	ebtor 1 George H Kouriabalis			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Movie Posters Line from Schedule A/B: 8.1	\$100.00		\$100.00	735 ILCS 5/12-1001(a)
_	Line Horr Generalie A.E. G			100% of fair market value, up to any applicable statutory limit	
	Used Clothes Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
	Line Horr Genedale A.B. TTT			100% of fair market value, up to any applicable statutory limit	
	Checking: Fifth Third Line from Schedule A/B: 17.1	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
	Line nom <i>Schedule Arb.</i> 11.1			100% of fair market value, up to any applicable statutory limit	
	Laboratory Equipment Line from Schedule A/B: 40.1	\$5,000.00		\$1,500.00	735 ILCS 5/12-1001(d)
	Line Horri Governo V.D. 1911			100% of fair market value, up to any applicable statutory limit	
	Laboratory Equipment Line from Schedule A/B: 40.1	\$5,000.00		\$700.00	735 ILCS 5/12-1001(b)
	Line Horr Schedule A.B. 40.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/28 and every			led on or after the date of adjustme	nt.)
	□ No				
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?
	■ No				
	Π Voc				

Fill in this inform	ation to identify you	r case:			
Debtor 1	George H Kouri	abalis			
	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS			
Case number					
(if known)					if this is an
				ameno	led filing
Official Form	106D				
		VAII I I O I - I O I	l less Deservation	_	
Schedule i	D: Creditors	Who Have Claims Secured	by Property	<u>/</u>	12/15
		f two married people are filing together, both are equout, number the entries, and attach it to this form. On			
` ,	nave claims secured by	vour property?			
	-		vy bovo notbina oloo to	ranant an thia form	
_		nis form to the court with your other schedules. Yo	ou nave nothing else to	report on this form.	
■ Yes. Fill in	all of the information I	pelow.			
Part 1: List All	Secured Claims				
2. List all secured c	laims. If a creditor has r	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	it the claims in alphabeti	al order according to the creditor's name.	value of collateral.	claim	If any
2.1 IRS		Describe the property that secures the claim:	\$233,941.00	\$10,000.00	\$223,941.00
Creditor's Name		Personal Property			
PO BOX 73	346	As of the date you file, the claim is: Check all that			
	ia, PA 19101	apply. Contingent			
<u> </u>	City, State & Zip Code	☐ Unliquidated			
	эн, эни и шр ээгэ	☐ Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla		Other (including a right to offset)			
Date debt was incu	rred	Last 4 digits of account number			

Debtor 1 G	ebtor 1 George H Kouriabalis				Case number (if known)				
Firs	st Name	Middle N	ame	Last Name					
	alized Loa	ın	Describe t	ne property that secure	es the cla	im:	\$361,922.00	\$800,000.00	\$0.00
Creditor's	Name		1032 Ber Cook Co	tte Ln. Glenview, l ounty	L 6002	5			
P.O. B	Bankrupto ox 63014 on, CO 80	7	As of the dapply.	ate you file, the claim	is: Check a	II that			
	Number, Street, City, State & Zip Code Number, Street, City, State & Zip Code Unliquidated Disputed Nature of lien. Check all t								
■ Debtor 1 or □ Debtor 2 or	nly	eck one.	_	ement you made (such	•	ge or secured			
Debtor 1 ar		only ors and another	_	y lien (such as tax lien, r	mechanic'	s lien)			
Check if th	is claim rela		_	nt lien from a lawsuit ncluding a right to offset)				
Date debt was		Opened 3/26/03 Last Active 11/22	Las	t 4 digits of account nu	ımber	8072			
Add the doll	ar value of v	your entries in C	Column A on	this page. Write that n	ımher he	re.	\$595,863	: 00	
	last page of			lue totals from all page			\$595,863		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Debtor 1 George H Kourlaballs Prat Nove Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims arounded filing Official Form 206E/F Schedule E/F: Creditors Who Have Unsecured Claims arounded filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims arounded filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims arounded filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims arounded filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims arounded filing Official Form 106E/F Schedule E/F: Creditors Unsecured Claims arounded filing Official Form 106E/F Schedule E/F: Official Form 106E/F Schedule E/F. Official Form 106E/F Schedule E/F. Official Form 106E/F Sched													
Packer P	FIII	in this inform	ation to identify your o	case:									
Debtor 2 Secons F, Hings	Deb	otor 1			e Name	I ast Nam	10						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (# rown) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims a se complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on the hospital classes (Chicago Alberton) and the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: I work and a continuation Page to this page, If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Do any creditors have priority unsecured claims. List all of your PRIORITY Unsecured claims. If a creditor has more than one priority unsecured claim, felt the creditor separately for each claim. For each claim listed, identify lyrate your doctors have priority unsecured claims, against you? No. Oo to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claims, felt the creditor separately for each claim. For each claim listed, identify lyrate your control of your your stream one creditor follows particular scheme. In Part 3. (For an explanation of each type of claim, see the instruction booklet.) Total claim Priority Conditors Name PO BOX 1935 Chicago, IL 60564 Philadelphia, PA 19101 Nombrie Servet Cry Stine 2 Goode Who incurred the debt? Check one. Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 6 only Debtor 8 only 1 on 1 o	Deb	otor 2	r not reamo	Wilde	o ramo	Edot Nam							
Case number Check if this is an amended filing Check if this is an amended filing Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party or Schedule Case Case (Check in the Schedule Case (Check	(Spo	use if, filing)	First Name	Middle	e Name	Last Nam	ne						
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Bas a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to present to proceed the state shall be contracted or unserpted teases that could result in a claim. All site accusing contracts on schedule Aft. Property (Official Priori 162AB) and on 162AB) and on 162AB and on 162	Unit	ted States Ban	kruptcy Court for the:	NORTHE	RN DISTRIC	T OF ILLINOIS							
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to represent the party of the party to recent the party	Coo	a numbar											
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party is presectory contracts or unexplied leases that are listed of not observed to Executory Contracts and Unexplied Leases (Official Form 106A) and on Schedule A/B: Property (Official Form											Check	if this is a	ın
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to preventive contracts or unappring disease that could result in a claim, Also list security contracts or on Schedule AB. Property (Official Form 106A6) and on Schedule D. Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the first. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part II. List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Press. Last all of your priority unsecured claims. If a creditor has more than one priority unsecured claims, list a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority and nonpriority and nonpriority and page of Part 1. If more than one creditor holds a perticular claim, list the ther creditor is Part 3. (For an explanation of each type of claim is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor is Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) For an explanation of each type of claim is. If a claim has both priority and nonpriority amounts. As much as possible, list the claims and priority amounts. As much as possible, list the claims and priority amounts. As much as possible, list the claims and priority amounts. As much as possible, list the claims in priority amounts. As much as possible, list the claims in priority amounts. As much as possible, list the claim is for a community debt in the claim is for a community debt										_	amend	ed filing	
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to preventive contracts or unappring disease that could result in a claim, Also list security contracts or on Schedule AB. Property (Official Form 106A6) and on Schedule D. Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the first. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part II. List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Press. Last all of your priority unsecured claims. If a creditor has more than one priority unsecured claims, list a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority and nonpriority and nonpriority and page of Part 1. If more than one creditor holds a perticular claim, list the ther creditor is Part 3. (For an explanation of each type of claim is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor is Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) For an explanation of each type of claim is. If a claim has both priority and nonpriority amounts. As much as possible, list the claims and priority amounts. As much as possible, list the claims and priority amounts. As much as possible, list the claims and priority amounts. As much as possible, list the claims in priority amounts. As much as possible, list the claims in priority amounts. As much as possible, list the claim is for a community debt in the claim is for a community debt	∩ff	ioial Earm	106E/E										
Bas as complete and accurate as possible. Use Part 1 for creditors with PRINCHTY Claims and Part 3 for creditors with NORNPRORTHY claims. List the other party may rescuring contracts or underpote lasses that could result in a claim. Also list executory contracts on Schedule AIS. Property (Cifical Form 1669). Do not include any creditors with partially secured claims shaded in Schedule Dr. Creditors with partially secured claims. Also list executory contracts and content of the common property in the part of the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 12 List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you?				ho Hay	o Uncoc	surad Claim						12/1	5
any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB. Property (Official Form 106A/B) and on the Schedule C. Secretory Contracts and Unexpired Leases (Official Form 106A, Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property, if more space is needed, copy the Part you need, fill it out, number the antires in the boxes on the number of Known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2.								croditors wi	th NON	DDIODITY	claime Li		
Schedule D: Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the life. Attach the Continuation Page of this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1													
List Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known)													
List All of Your PRIORITY Unsecured Claims against you?	left.	Attach the Cont	inuation Page to this pag										
1. Do any creditors have priority unsecured claims against you? No. Go to Part 2.			,										
No. Go to Part 2. Yes.													
Types System Sy			• •	d claims aga	ainst you?								
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is. If a claim has both priority and nonpriority amounts. As much as possible, list the claim sin alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount 2.1 IDOR - Bankruptcy Section Piority Creditor's Name PO Box 19035 Chicago, II. 60664 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Type of PRIORITY unsecured claim: Type of PRIORITY unsecured debts you were intoxicated PO Box 37346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Priority Creditor's Name PO Box 37346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 only Debtor 2 only Debtor 5 only Debtor 6 only Debtor 2 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1			III Z.										
identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority appossible, list the claims in shapebatecial order according to the rectifior's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. [For an explanation of each type of claim, see the instructions for this form in the instruction booklet.] [For an explanation of each type of claim, see the instructions for this form in the instruction booklet.] [For an explanation of each type of claim, see the instructions for this form in the instruction booklet.] [For an explanation of each type of claim, see the instructions for this form in the instruction booklet.] [For an explanation of each type of claim, see the instructions for this form in the instruction booklet.] [For an explanation of each type of claim, see the instruction booklet.] [For an explanation of each type of claim, see the instruction booklet.] [For an explanation of each type of claim, see the instruction booklet.] [For an explanation of each type of claim, see the instruction booklet.] [For an explanation of each type of claim, see the instruction booklet.] [For an explanation of each type of claim, see the instruction booklet.] [For an explanation of each type of claim, see the instruction booklet.] [For an explanation of each type of priority amount instruction booklet.] [For an explanation of each type of priority amount instruction booklet.] [For an explanation of each type of priority amount instruction booklet.] [For an explanation of each type of priority amount instruction because of the debt or an explanation of each type of priority amount instruction booklet.] [For an explanation of each type of priority amount instruction booklet.] [For an explanation of each type of priority amount instruction booklet.] [For an explanation of each type of p			priority unsocured claims	. If a gradita	r has more tha	n one priority upoequ	urad alaim list	the ereditor of	onoroto	ly for oach	oloim For	aaah alaim	liotod
Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim		identify what typ	e of claim it is. If a claim ha	s both priorit	y and nonprior	ity amounts, list that	claim here and	d show both p	oriority a	nd nonprior	ity amoun	ts. As much	n as
Contingent Domestic support obligations							nore than two	priority unsec	cured cla	aims, fill out	the Conti	nuation Pag	ge of
DOR - Bankruptcy Section			•				n booklet.)						
IDOR - Bankruptcy Section								Total claim		-			rity
PO Box 19035 Chicago, IL 60664 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Priority Creditor's Name PO BOX 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 confiscency Domestic support obligations Taxes and certain other debts you owe the government State Claim subject to offset? Domestic support obligations Taxes and certain other debts you owe the government State Claim subject to offset? Domestic support obligations Taxes and certain other debts you owe the government State Claim subject to offset? Domestic support obligations Taxes and certain other debts you owe the government State Claim subject to offset? Domestic support obligations Last 4 digits of account number State Claim State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated	2.1	IDOR - B	Bankruptcy Section		Last 4 digits	of account number			\$0.00	umount	\$0.00	umount	\$0.00
Chicago, IL 60664 Number Street City State Zip Code Who incurred the debt? Check one. Check if this claim is for a community debt No Pobtor 1 only Other, Specify Other, Specify Obtor 1 only Other Street City State Zip Code Who incurred the debt? Check one. Contingent Other Street City State Zip Code Who incurred the debt? Check one. Check if this claim is for a community debt IRS		•			W/h a.za. 4h	- daht in annua d0							
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 tleast one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated					wnen was th	e debt incurred?				-			
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Debtor 1 and Debtor 2 only		Debtor 1 or	nly		☐ Unliquidat	ed							
At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Last 4 digits of account number Priority Creditor's Name Po BOX 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Check if this claim is for a community debt is the claim subject to offset? No Check if this claim is for a community debt is the claim subject to offset? No Check if this claim is for a community debt is the claim subject to offset? Obther. Specify Domestic support obligations Taxes and certain other debts you were intoxicated No Check if this claim is for a community debt is the claim subject to offset? Claims for death or personal injury while you were intoxicated		Debtor 2 or	nly		☐ Disputed								
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Check if this claim is for a community debt is the claim subject to offset?		_		er	☐ Domestic	support obligations							
Is the claim subject to offset? No Yes Other. Specify							vou owe the a	overnment					
Yes				,					ated				
IRS Priority Creditor's Name PO BOX 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Last 4 digits of account number \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.		■ No			Other. Spe	ecify							
Priority Creditor's Name PO BOX 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		☐ Yes			·								
Priority Creditor's Name PO BOX 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No When was the debt incurred? As of the date you file, the claim is: Check all that apply Lontingent Unliquidated Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		1							••••		40.00		40.00
PO BOX 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	2.2		ditor's Name		Last 4 digits	of account number			\$0.00		\$0.00		\$0.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply Contingent Duringent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		PO BOX	7346		When was th	e debt incurred?				_			
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Other. Specify □ Contingent □ Unliquidated □ Disputed □ Disputed □ Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify		Philadel	phia, PA 19101		A 4 - 4 - 4 - 4			4		-			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Debtor 1 and Secured claim: Domestic support obligations Taxes and certain other debts you owe the government Is the claim subject to offset? No Other. Specify			, ,		_		is: Check all	tnat apply					
□ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: □ At least one of the debtors and another □ Domestic support obligations □ Check if this claim is for a community debt Is the claim subject to offset? □ Claims for death or personal injury while you were intoxicated □ No □ Other. Specify		_			_								
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify			•			ea							
□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Other. Specify □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify		_	-		•	NDITY 1122000	aim:						
☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Check if this claim is for a community debt □ Claims for death or personal injury while you were intoxicated □ Other. Specify			•				ailli:						
Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify						-							
■ No □ Other. Specify □				nity debt									
<u> </u>			ubject to offset?			-							
					☐ Other. Spe	ecify							

Debtor	1 George H Kouriabalis		Case number (if known)	
	<u></u>			
Part 2:	List All of Your NONPRIORITY Unsecu	red Claims		
3. Do	any creditors have nonpriority unsecured claim	s against you?		
	No. You have nothing to report in this part. Submit	this form to the court with your other scho	edules.	
	Yes.			
uns tha	t all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each cl n one creditor holds a particular claim, list the other t 2.	aim. For each claim listed, identify what	type of claim it is. Do not list claims already inc	cluded in Part 1. If more
				Total claim
4.1	Capital One	Last 4 digits of account number	8359	\$3,723.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 03/22 Last Active 03/23	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	I	_
4.2	CFNA	Last 4 digits of account number	0392	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 81315 Cleveland, OH 44181	When was the debt incurred?	Opened 08/03 Last Active 08/16	-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	-

Debtor	1 George H Kouriabalis	Case number (if known)					
4.3	Chase Mortgage	Last 4 digits of account number	6913	\$0.00			
	Nonpriority Creditor's Name Chase Records Center/Attn: Correspondenc Mail Code LA4 5555 700 Kansas Ln Monroe, LA 71203	When was the debt incurred?	Opened 08/04 Last Active 12/31/20				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Credit Line					
4.4	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	9871	\$10,835.00			
	PO Box 790040 St Louis, MO 63179	When was the debt incurred?	Opened 10/85 Last Active 8/22/24				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	☐ Debts to pension or profit-sharin					
	Yes	Other. Specify Credit Card	<u> </u>				
4.5	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	6940	\$0.00			
	PO Box 790040 St Louis, MO 63179	When was the debt incurred?	Opened 10/98 Last Active 01/12				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	eparation agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other. Specify					

Last 4 digits of account number 4486 \$0.00 Name er Suite 1250 When was the debt incurred?	
er Suite 1250 When was the debt incurred?	CitiBank C/O Manley Deas Kochalski
	Nonpriority Creditor's Name One East Wacker Suite 1250 Chicago, IL 60601
• • • • • • • • • • • • • • • • • • • •	Number Street City State Zip Code Who incurred the debt? Check one.
☐ Contingent	Debtor 1 only
☐ Unliquidated	Debtor 2 only
otor 2 only Disputed	Debtor 1 and Debtor 2 only
_	☐ At least one of the debtors and another
	Check if this claim is for a community
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?
☐ Debts to pension or profit-sharing plans, and other similar debts	■ No
Other Specify Notice	□Yes
<u> </u>	First Midwest Bank Nonpriority Creditor's Name
Opened 08/18 Last Active	. 1 . 7
When was the debt incurred? 5/13/20	One Pierce Place Lower LEvel Itasca, IL 60143
	Number Street City State Zip Code
	Who incurred the debt? Check one.
Contingent	■ Debtor 1 only
Unliquidated	Debtor 2 only
,	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another
	☐ Check if this claim is for a community
Obligations arising out of a separation agreement or divorce that you did not	debt Is the claim subject to offset?
Debts to pension or profit-sharing plans, and other similar debts	■ No
Other. Specify	☐ Yes
rd Services Last 4 digits of account number 4073 \$0.00	Genesis FS Card Services
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477
97076	Beaverton, OR 97076 Number Street City State Zip Code
ebt? Check one.	Who incurred the debt? Check one.
☐ Contingent	Debtor 1 only
☐ Unliquidated	Debtor 2 only
·	Debtor 1 and Debtor 2 only
	\square At least one of the debtors and another
· · · · · · · · · · · · · · · · · · ·	Check if this claim is for a community
☐ Obligations arising out of a separation agreement or divorce that you did not to offset? report as priority claims	debt Is the claim subject to offset?
Debts to pension or profit-sharing plans, and other similar debts	■ No
■ Other. Specify Credit Card	☐ Yes

Debtor	1 George H Kouriabalis		Case number (if known)				
4.9	Harlem & Milwaukee	Last 4 digits of account number	5107	\$0.00			
	Nonpriority Creditor's Name 7505 N Milwaukee Ave. Niles, IL 60714	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify notice	_				
4.1	Harlem & Milwaukee	Last 4 digits of account number	5107	\$1,900.00			
	Nonpriority Creditor's Name C/O Sorman Frankel 180 N LaSalle St STE 2700						
	Chicago, IL 60601 Number Street City State Zip Code	As of the date you file, the claim i	e. Chock all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim	s. Oneck all trial apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	sharing plans, and other similar debts				
	Yes	Other. Specify					
4.1	Inland Bank	Last 4 digits of account number	1117	\$0.00			
	Nonpriority Creditor's Name 2805 Butterfield Road	When was the debt incurred?	Opened 11/02/17 Last Active 10/11/19				
	Oak Brook, IL 60523						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	it-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Secured					

Debto	George H Kouriabalis	Case number (if known)					
4.1	Inland Bank Nonpriority Creditor's Name	Last 4 digits of account number	0917	\$0.00			
	2805 Butterfield Road Oak Brook, IL 60523	When was the debt incurred?	Opened 9/11/17 Last Active 4/15/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Secured					
4.1	Jefferson Capital Systems, LLC Nonpriority Creditor's Name	Last 4 digits of account number	1003	\$305.00			
	Attn: Bankruptcy 200 14th Ave E Sartell, MN 56377	When was the debt incurred?	Opened 12/23 Last Active 08/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Factoring C	Company Account Sprint				
4.1	Jpmcb Nonpriority Creditor's Name	Last 4 digits of account number	4512	\$9,540.00			
	MailCode LA4-7100 700 Kansas Lane Monroe, LA 71203	When was the debt incurred?	Opened 09/94 Last Active 8/21/24				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharin					
	☐ Yes	Other. Specify Credit Card					

Debtor	1 George H Kouriabalis	Case number (if known)					
4.1 5	Lutheran General Hospital	Last 4 digits of account number		\$9,000.00			
	Nonpriority Creditor's Name 1775 Dempster St Park Ridge, IL 60068	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
4.1	Lvnv Funding/Resurgent Capital	Last 4 digits of account number	2739	\$693.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 10/23 Last Active 03/23				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only ☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Factoring (Bank N.A.	Company Account Credit One				
4.1	Mr. Cooper	Last 4 digits of account number	4611	\$0.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 619098 Dallas, TX 75261	When was the debt incurred?	Opened 3/26/03 Last Active 1/31/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	nunity Student loans Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	and the state of t				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Real Estate	Mortgage				

Debtor 1	George H Kouriabalis		Case nu	mber (if known)	
4.1 8 S	antander Consumer USA, Inc	Last 4 digits of account number	1000		\$0.00
A P	onpriority Creditor's Name ttn: Bankruptcy o Box 961245 ort Worth, TX 76161	When was the debt incurred?	Open 3/29/2	ed 12/13 Last Active 22	
Nu	Imber Street City State Zip Code ho incurred the debt? Check one.	As of the date you file, the claim	is: Check	all that apply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	ebt	☐ Obligations arising out of a sepa	aration ag	reement or divorce that you d	id not
	the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharir		and other similar debts	
	Yes	Other. Specify Automobile	9		
9 G	ynchrony Bank/AVB Buying roup	Last 4 digits of account number	0106		\$0.00
A P	onpriority Creditor's Name ttn: Bankruptcy o Box 965060	When was the debt incurred?	Open 07/07	ed 10/00 Last Active	
	rlando, FL 32896 Imber Street City State Zip Code	As of the date you file, the claim	is: Check	all that apply	
	ho incurred the debt? Check one.	,,, ,, ,, ,		a a.a. app.y	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	bt the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or divorce that you d	id not
	No.	Debts to pension or profit-sharing	ng plans, a	and other similar debts	
	Yes	Other. Specify			
Part 3:	List Others to Be Notified About a Dek	ot That You Already Listed			
5. Use this is trying have mo	page only if you have others to be notified a to collect from you for a debt you owe to so re than one creditor for any of the debts that or any debts in Parts 1 or 2, do not fill out o	bout your bankruptcy, for a debt that y meone else, list the original creditor ir t you listed in Parts 1 or 2, list the add	Parts 1	or 2, then list the collection	agency here. Similarly, if you
Part 4:	Add the Amounts for Each Type of Un	secured Claim			
	amounts of certain types of unsecured clainsecured clainsecured claim.	ms. This information is for statistical r	eporting	purposes only. 28 U.S.C. §1	59. Add the amounts for each
	0		0	Total Claim	
Total	6a. Domestic support obligations	i e	6a.	\$	0.00
claims from Part 1	6b. Taxes and certain other debts	s you owe the government	6b.	\$	0.00
		injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority uns	ecured claims. Write that amount here.	6d.	\$	0.00
	6e. Total Priority. Add lines 6a thro	ough 6d.	6e.	\$	0.00
				Total Claim	
	6f. Student loans		6f.	\$	0.00

Total claims

Debtor 1 George H Kouriabalis

Case number (if known)

	. c. gc	- Touridadilo		,	-
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	57,944.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	57,944.00

Fill in this infor	rmation to identify your	case:			
Debtor 1	George H Kourial	balis			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if th	nis is an
				amended	filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number,	whom you have the Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

Debtor 1	George H Kouria	balis			
	First Name	Middle Name	Last Name		
Debtor 2	F:N	ACT III AL			
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb (if known)	per				☐ Check if this is an
	Form 106H				amended filing
Sched	ule H: Your Cod	ebtors			12/15
	nin the last 8 years, have you a, California, Idaho, Louisiana				states and territories include
☐ Yes.		ors. Do not include your	spouse as a codebtor		with you. List the person showr creditor on Schedule D (Officia
Form 1					chedule E/F, or Schedule G to fi
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
_	Number Street			_	
	City	State	ZIP Code		
22				□ Sahadula D. Sa	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Chedule E/F, line ☐	
				☐ Schedule G, line	
				— Schedule G, lifte	
	Number Street	Ctoto	ZIP Code		
C	City	State	ZIP Code		

Fill	in this information to identify your ca	ase.									
	otor 1 George H K										
_	otor 2										
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	T OF ILLINOI	S							
	se number nown)						Check if this is An amende A supplem 13 income	ed filing ent sho	owing	g postpetition ollowing date:	chapter
0	fficial Form 106I						MM / DD/ `	/YYY			
S	chedule I: Your Inc	ome					, ==,				12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t 1: Describe Employment	ır spouse is not filing wi	th you, do no	t include info	rmati	ior	about your sp	ouse. I	lf mo	ore space is r	eeded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or no	n-fi	ling spouse	
	If you have more than one job,	Employment status	■ Employe	ed			■ Empl	oyed			
	attach a separate page with information about additional	Employment status	☐ Not emp	loyed			☐ Not e	mploy	ed		
	employers.	Occupation	employee				employ	/ee			
	Include part-time, seasonal, or self-employed work.	Employer's name	Approved	Medical Se	rvice	es	Hidden	Valle	y M	lanufacturin	g
	Occupation may include student or homemaker, if it applies.	Employer's address		mer Rd STE ok, IL 60062	150)	1197 W Wheeli	_			
		How long employed to	here? 5	years				l year			
Par	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothi	ing to report fo	r any	lin	e, write \$0 in the	space	. Inc	clude your non	-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the info	ormation for all	emp	loy	ers for that perso	on on t	he lir	nes below. If y	ou need
						F	For Debtor 1			btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	•	, ,	_	. \$	S _	1,700.00	\$_		3,290.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	S _	0.00	+\$	_	0.00	

1,700.00

3,290.00

Calculate gross Income. Add line 2 + line 3.

Debt	or 1	George H Kouriabalis	-	Case	number (<i>if known</i>)			
				For	Debtor 1	For Debtor		
	Сор	y line 4 here	4.	\$	1,700.00	\$3	,290.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	542.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.+	- \$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	542.00	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,700.00	\$2	2,748.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: SunCloud Health	_ 8h.+	· —	1,900.00		0.00	
		Exam Corp	_	\$	1,600.00	\$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,500.00	\$	0.00	
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$		5,200.00 + \$	2,748.00	= \$	7,948.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		,,200.00 · \psi_	2,740.00	$\exists \exists $ $-$	7,940.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depen			ed in <i>Schedul</i>	le J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					\$	7,948.00

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Combined monthly income

Fill	in this information to identify yo	our case:					
Deb	George H Ko	ouriabalis				k if this is:	
	otor 2 ouse, if filing)					•	ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
	e number nown)						
0	fficial Form 106J						
Be	chedule J: Your as complete and accurate as primation. If more space is ne mber (if known). Answer eve	s possible. eded, attac	If two married people ar				
Par 1.	t 1: Describe Your House Is this a joint case?	ehold					
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live ☐ No ☐ Yes. Debtor 2 mu:		ate household? al Form 106J-2, <i>Expens</i> es	for Separate House	ehold of Debi	tor 2.	
2.	Do you have dependents?	□ No					
	Do not list Debtor 1 and Debtor 2.	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state the dependents names.			Son		17	□ No ■ Yes □ No
				Daughter		24	■ Yes □ No □ Yes □ No
3.	Do your expenses include expenses of people other t yourself and your depende	han _	No Yes				☐ Yes
exp	t 2: Estimate Your Ongoi imate your expenses as of y enses as of a date after the blicable date.	our bankru	ptcy filing date unless y				
the	lude expenses paid for with value of such assistance an ficial Form 106l.)					Your expe	enses
4.	The rental or home owners payments and any rent for the			nclude first mortgage	e 4. \$		2,982.15
	If not included in line 4:						
	4a. Real estate taxes4b. Property, homeowner'				4a. \$ 4b. \$		0.00 0.00
	4c. Home maintenance, re4d. Homeowner's associa	•			4c. \$ 4d. \$		0.00
5.	Additional mortgage paym			me equity loans	5. \$		0.00

Debtor 1	George H Kouriabalis	Case num	ber (if known)	
6. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	480.00
6b.	Water, sewer, garbage collection	6b.	\$	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
6d.	Other. Specify:	6d.	\$	0.00
. Foc	d and housekeeping supplies		\$	900.00
	Idcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	150.00
	sonal care products and services	10.	· · · · · · · · · · · · · · · · · · ·	150.00
	lical and dental expenses	11.	·	65.00
	nsportation. Include gas, maintenance, bus or train fare.		<u> </u>	00.00
	not include car payments.	12.	\$	350.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ritable contributions and religious donations	14.	\$	0.00
	urance.		•	<u> </u>
	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.	\$	220.00
15d	. Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		·	
	cify:	16.	\$	0.00
	allment or lease payments:			
	. Car payments for Vehicle 1	17a.	\$	0.00
17b	. Car payments for Vehicle 2	17b.	\$	0.00
17c	Other. Specify: Spouse's Credit Card Payments	17c.	\$	500.00
17d	. Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	¢	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	· ·	
	er payments you make to support others who do not live with you.	19.	\$	0.00
	cify: er real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i> c		our Incomo	
	 Mortgages on other property 	20a.		0.00
	. Real estate taxes	20a. 20b.		0.00
		20b.	·	
	Property, homeowner's, or renter's insurance		· -	0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	. Homeowner's association or condominium dues	20e.		0.00
l. Oth	er: Specify:	21.	+\$	0.00
2. Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	6,197.15
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	6,197.15
			Ψ	0,137.13
	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	· -	7,948.00
23b	. Copy your monthly expenses from line 22c above.	23b.	-\$	6,197.15
00				
230	 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c.	\$	1,750.85
For	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your iffication to the terms of your mortgage?	u file this mortgage	s form? payment to increase	or decrease because of a
	No			
	/es. Explain here:			

Fill in this infor	mation to identify your	case:					
Debtor 1	George H Kouriabalis First Name Middle Name Last Name						
Debtor 2	First Name	Middle Name	Last Name				
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)					neck if this is an nended filing		
Official Forr	-	n ladividual	Dobtorio Co	hadulaa			
Declarat	tion About a	<u>an Individual</u>	Deptor 5 30	nedules	12/15		
years, or both. 1	y or property by fraud ii 18 U.S.C. §§ 152, 1341, 1 in Below		truptcy case can result i	n fines up to \$250,000, or impriso	mment for up to 20		
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?			
■ No							
☐ Yes. I	Name of person				Bankruptcy Petition Preparer's Notice, tion, and Signature (Official Form 119)		
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	d with this declaration and			
X /s/ Ged	orge H Kouriabalis		X				
Georg	e H Kouriabalis ire of Debtor 1		Signature of	Debtor 2			
Date	May 22 2025		Date				

	Lin this inform					
		nation to identify you				
De	btor 1	George H Kouria	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
	se number				_	Check if this is an mended filing
St Be	as complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup	
nur	nber (if know	n). Answer every que	•		, adamona, pagos, imio yes	ii namo ana cacc
1.		r current marital statu				
	■ Married□ Not mar	rried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	Ill businesses, including part-		ndar years?
	□ No ■ Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,000.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

For last calendar year: (January 1 to December 31, 2024) Wages, commissions, bonuses, tips	D	ebtor 1 Ge	eorge H K	ouriabalis		Cas	e number (if known)	
Sources of Income Check all that apply: Check all that apply. Check all that apply and exclusions). Check all that apply all the solutions of the solutions and exclusions. Check all that apply all the solutions and exclusions. Check all that apply. Check all that apply. Check all that apply all the solutions and exclusions all the solutions and exclusions. Check all that apply all the solutions and exclusions all that apply all the solutions and exclusions. Check all that apply all the solutions and exclusions all that apply all the solutions and exclusions. Check all that apply all that apply all the solutions and exclusions all that apply all the solutions and exclusions. Check all that apply all that apply all that apply all the solutions and exclusions all that apply all the so					Dahtar 4		Dahtan 2	
Clanuary 1 to December 31, 2024 Donuses, tips					Sources of income	(before deductions and	Sources of income	(before deductions
For the calendar year before that: (January 1 to December 31, 2023)				31, 2024)		\$22,626.00		
(January 1 to December 31, 2023) Doperating a business					Operating a business		☐ Operating a business	
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployme and other public benefit payments; pensions; rental income; interest; dividends; mome you collected from lawsuits; royalties; and gambling and lotte winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No						\$28,892.00		
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support. Social Security, unemployme and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lotte winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Debtor 1 Sources of income Describe below. Debtor 2 Sources of income Describe below. Debtor 2 Sources of income Describe below. Debtor 2 Sources of income Describe below. Describe below. Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more? No. Go to line 7. Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support ob					Operating a business		☐ Operating a business	
Sources of income Describe below. Coross income From each source (before deductions and exclusions) Sources of income Describe below. Gross income (before deductions and exclusions)		winnings. List each	If you are fil	ing a joint ca	se and you have income that y	you received together, list it o	nly once under Debtor 1.	io gambiing and lottery
Sources of income Describe below. Coross income from each source (before deductions and exclusions) Sources of income Describe below. Gross income (before deduction and exclusions)					Debtor 1		Debtor 2	
6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case.					Sources of income	each source (before deductions and	Sources of income	(before deductions
 No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case. 	Pá	art 3: Lis	t Certain Pa	ıyments Yoı	ı Made Before You Filed for	Bankruptcy		
paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case.	6.		Neither Deindividual During the No.	ebtor 1 nor primarily for 90 days bef Go to line	Debtor 2 has primarily consular personal, family, or househo ore you filed for bankruptcy, diff.	umer debts. Consumer debta Id purpose." id you pay any creditor a tota	of \$8,575* or more?	
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case.				paid that c	reditor. Do not include paymer e payments to an attorney for t	nts for domestic support oblig his bankruptcy case.	ations, such as child support	and alimony. Also, do
Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case.		■ Yes.					of \$600 or more?	
include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case.			■ No.	Go to line	7.			
Continue Name and Address			□ Yes	include pa	yments for domestic support o			
		Credite	lo Nome s-	d Address	Datas of movement	ant Total amount	Amount you Was this	novment for

paid

still owe

Official Form 107

((Within 1 year before you filed for bankruptour insiders include your relatives; any general particle of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for
ļ	■ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
i	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi		ments or transfer a	nny property on a	ecount of a de	ebt that benefited an
,	■ No					
	_					
-						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Part	4: Identify Legal Actions, Repossession	s, and Foreclosures				
L	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
ſ	□ No					
ľ	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Citibank v. George H Kouriabalis 2023CH04486	foreclosure			■ Pending □ On appe □ Conclud	al
	Harlem Milwaukee Currency Exchange vs Exam Corp, George Kouriabalis 20231125107	civil			☐ Pending ☐ On appe ☐ Conclud	eal
(I	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?
Ī	Creditor Name and Address	Describe the Property		Date		Value of the
	Ordator Name and Address	Explain what happened		Date		property
ĺ	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.	tcy, did any creditor, incl		nancial institution	, set off any a	amounts from your
-				_		
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an ■ No □ Yes		rty in the possess	ion of an assigne	e for the bene	efit of creditors, a

Case number (if known)

Debtor 1 George H Kouriabalis

Pa	rt 5: List Certain Gifts and Contributions				
		ptcy, o	did you give any gifts with a total value of more	than \$600 per person	?
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:		Describe the gifts	Dates you gave the gifts	Value
14.			did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankrupt or gambling? ■ No □ Yes. Fill in the details.	tcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	how the loss occurred	nclude	be any insurance coverage for the loss at the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	tt 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or pr	epari	id you or anyone else acting on your behalf pay ng a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Wonais Law, LLC 11070 S. Western Ave. STE 9 Chicago, IL 60643 john@wonaislaw.com		Attorney Fees for current case \$4500	5/22/2025	\$4,500.00
	Wonais Law, LLC 11070 S. Western Ave. STE 9 Chicago, IL 60643 john@wonaislaw.com afrodite barz		Attorney Fees for prior case 24-13749	9/18/2024	\$4,500.00

Case number (if known)

Debtor 1 George H Kouriabalis

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.						
	Person Who Was Paid Address	Description and vatransferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details.	iness or financial affa e as security (such as the	irs? ne granting of a se				
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferr			iny property or received or debts change	Date transfer was made	
19.							
						Date Transfer was made	
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, association No	were any financial accoun	counts or instrum	ents held in			
	Name of Financial Institution and	ast 4 digits of account number	Type of account instrument	clo	re account was sed, sold, ved, or nsferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 yearsh, or other valuables? No Yes. Fill in the details.	ar before you filed for	bankruptcy, any	safe deposit	box or other deposit	tory for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		escribe the o	contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the o	contents	Do you still have it?	

Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Informa	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	- ·				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n they occurred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ironmental law? Include settlements	and orders.			
	No						
	Yes. Fill in the details.	•	N. c.	o			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Con	nections to Any Business					
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
	☐ A sole proprietor or self-employed in a t			,			
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing execut	ive of a corporation					
☐ An owner of at least 5% of the voting or equity securities of a corporation							

Debtor 1 George H Kouriabalis		Case number (if known)
☐ No. None of the above applies. Go to	Part 12	
Yes. Check all that apply above and file	I in the details below for each business).
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
(Number, Street, Only, State and 211 Gode)	Name of accountant or bookkeeper	Dates business existed
Exam Corp	Laboratory -	EIN:
1032 Bette Lane Glenview, IL 60025		From-To 2013-2025
Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part 12: Sign Below		
	false statement, concealing property,	nd I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection by years, or both.
-		
Date May 22, 2025	Date	
Did you attach additional pages to <i>Your Stateme</i> ■ No □ Yes	ent of Financial Affairs for Individuals I	Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is no ■ No □ Yes. Name of Person Attach the Bankru	,	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

COURT-APPROVED RETENTION AGREEMENT

(for cases filed on or after March 15, 2021)

This agreement describes the rights and duties of debtors and their lawyers in Chapter 13 bankruptcy cases in the Northern District of Illinois. The debtor and lawyer must enter into this agreement for the lawyer to receive a flat fee of \$_4,500.00_{\text{as compensation}}\$ as compensation in the case. By signing this agreement, the debtor and lawyer agree to do everything this agreement requires.

DO NOT sign this agreement unless you have read it and understand it.

This agreement replaces any conflicting agreement between the debtor and the lawyer. If any provision of another agreement conflicts with this agreement, the lawyer will not be awarded a flat fee as compensation in the case.

The lawyer must perform all tasks reasonably necessary for the bankruptcy case. Performance of those tasks is a condition of receiving the flat fee. The lawyer may not charge any other fees for representing the debtor in the case. The sole exception, explained below, is representation of the debtor in certain lawsuits in the bankruptcy case known as adversary proceedings.

1. Duties of the Debtor and the Lawyer

A. Counseling Before Filing a Bankruptcy Case

Before a bankruptcy case is filed, the debtor must provide financial and other information to the lawyer. The lawyer must evaluate the information and advise the debtor whether filing a bankruptcy case is appropriate, and if so, under which chapter of the Bankruptcy Code. The lawyer must explain the advantages and disadvantages of filing a bankruptcy case.

If filing a chapter 13 bankruptcy case is appropriate, the lawyer must explain how and when attorneys' fees will be paid.

B. Documents for the Case

The lawyer or a member of the lawyer's staff must prepare all the documents required to be filed in the bankruptcy case. The debtor must provide all information the lawyer or a member of the lawyer's staff requests to prepare the documents. Failure to provide requested information will make it difficult or impossible for the lawyer to file the case or to represent the debtor once the case is filed. The lawyer must review each document with the debtor, who must approve and sign the documents.

C. Representation of the Debtor throughout the Case

The lawyer must represent the debtor at the § 341 meeting of creditors and in all court hearings. The lawyer must prepare and file all motions necessary for the case and must represent the debtor on all other motions that affect the debtor's interests.

The lawyer must examine all claims creditors file in the case and must object to claims if appropriate.

Best Case Bankruptcy

The lawyer must be available to answer the debtor's questions about the case and must answer them in a timely manner.

The debtor must notify the lawyer of any significant change in the debtor's circumstances, such as the loss of a job or the proposed purchase or sale of a home or car. The debtor must also notify the lawyer of any change in the debtor's address, phone number, or email address.

If the debtor and the lawyer decide that the case should be converted to a case under chapter 7, the lawyer must file the notice of conversion.

The lawyer must file and represent the debtor in adversary proceedings for turnover of property of the bankruptcy estate.

2. Attorneys' Fees and Expenses

A. Flat Fee for Attorneys' Fees

The lawyer may charge a flat fee for all services required in this agreement. The flat fee may not exceed the amount permitted by the court when the case is filed.

The flat fee does not cover:

- representing the debtor in adversary proceedings other than for turnover of estate property
- representing the debtor in the chapter 7 case, if the case is converted to chapter 7
- representing the debtor in appeals

The debtor and the lawyer can negotiate an additional fee for representation in adversary proceedings not included in the flat fee and for representation in a chapter 7 case if the case is converted.

B. Expenses

The lawyer may also charge the debtor for certain actual, necessary expenses incurred in representing the debtor as permitted in this paragraph. These expenses are in addition to the flat attorney's fees. The court must approve all expenses.

The lawyer may charge the debtor for the following expenses:

- Court filing fees
- Fees charged by a credit reporting agency for a credit report
- Copying and postage charges as follows:
 - 1. A flat fee not to exceed \$25 for all copying and postage charges in the case. The copying and postage charges need not be itemized

- 2. The actual amount of postage and copying costs (no more than \$0.10 per page) incurred in the case. The itemization must state (a) the number of copies and the dates when the copies were made, and (2) the dates and amounts of postage charges incurred.
- Fees charged by the IRS or other taxing authorities to obtain tax returns
- Other actual, necessary expenses, but only if the lawyer submits to the court an itemization of the expenses with supporting copies of invoices or other documents

The lawyer may not charge the debtor for an outside service that serves documents filed in the bankruptcy case.

C. Advance Payment to the Lawyer

The lawyer and the debtor must agree on whether the debtor will pay any or all of the attorneys' fee owed for the case before it is filed.

If the debtor makes a payment before the case is filed, the payment will be treated as an advance payment retainer.

The lawyer must explain to the debtor how an advance payment retainer is treated. The lawyer will not hold the retainer in a client trust account and it will become property of the lawyer upon payment. The special purpose of the advance payment retainer is that it permits the lawyer to be paid for essential work that must be performed before the court can consider the lawyer's fee application. The lawyer is not required to keep detailed time records because this is a flat fee agreement. The lawyer need not refund any portion of the advance payment if work is not performed, unless the court orders the lawyer to do so.

D. Payment of the Balance during the Case

Attorneys' fees not paid before the case is filed will be paid to the lawyer by the trustee out of the debtor's plan payments. The debtor may not pay the lawyer directly after the case is filed.

The debtor's Chapter 13 plan may not provide for current monthly payments to secured creditors that are other than in equal amounts. The lawyer may not file a Chapter 13 plan for the debtor in which payments to a secured creditor are set at an amount that accelerates payments to the lawyer.

E. Additional Fees in Extraordinary Circumstances

In extraordinary circumstances, the lawyer may apply to the court for additional compensation. The application must be accompanied by an itemization of the services rendered.

3. Coverage Counsel

A. Disclosure of the Practice

If the debtor's lawyer has a practice of using other lawyers not employed at the same firm to perform any of the lawyer's obligations under this agreement, he must disclose that practice to the debtor before the debtor signs the agreement.

B. Identifying Coverage Counsel

If the debtor's lawyer asks another lawyer not employed at the same firm to represent the debtor at the meeting of creditors or at any court appearance, the debtor's lawyer must notify the debtor in advance and must provide the name of the lawyer who will represent the debtor.

C. Providing Information to Coverage Counsel

If the debtor has information to give the other lawyer for the meeting of creditors or for a court appearance, the debtor must give that information to the debtor's lawyer. The debtor's lawyer must then promptly forward the information to the lawyer representing the debtor at the meeting or in court.

4. Dismissal or Conversion of the Case

If the bankruptcy case is dismissed or converted to another chapter before all plan payments have been made, the attorneys' fees paid to the lawyer are not refundable, unless the court orders the fees refunded.

If the bankruptcy case is dismissed after the court has granted the lawyer's application for compensation, the lawyer will not enforce the order granting the application against the debtor for any unpaid fees or expenses.

5. Termination of this Agreement

The debtor may terminate this agreement at any time. By terminating the agreement, the debtor ends the lawyer's representation. If the lawyer has not been paid in full when the agreement is terminated, the court may reduce the balance of attorneys' fees owed based on the services the lawyer provided before termination.

If the debtor terminates this agreement and hires another lawyer, the court may apportion the flat fee between the lawyers.

The lawyer may terminate this agreement only with court approval.

6. Amount of Attorneys' Fees and Expenses

A. Attorneys' Fees:

The debtor agrees to pay the lawyer a flat fee of \$_4,500.00 for the lawyer's services in the chapter 13 case.

В.	Expenses:

The estimated expenses for the case are:	\$ 0.00	
These expenses are for:		

Debtor		Date:	May 22, 2025	
Debtor		Lawye		
George H Kouriabalis		John P	. Wonats	
/s/ George H Kontiabalis		Isl John P Wonais		
	Balance, owed by debtor:	\$	0.00	
	Advance payment by debtor:	\$	4,500.00	
C.	Total Fees and Estimated Expenses:		\$ 4,500.00	
			\$ 0.00	
			\$ 0.00	
			\$ 0.00	
			\$ 0.00	

United States Bankruptcy Court Northern District of Illinois

In r	e George H Kouriabalis		Case No.				
		Debtor(s)	Chapter	13			
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR DE	EBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	4,500.00			
	Prior to the filing of this statement I have received			4,500.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compensat	ion with any other persor	n unless they are mem	bers and associate	s of my law firm.		
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of				ny law firm. A		
5.	In return for the above-disclosed fee, I have agreed to render	legal service for all aspec	ets of the bankruptcy of	ease, including:			
	a. Analysis of the debtor's financial situation, and rendering ab.b. Preparation and filing of any petition, schedules, statemenc. Representation of the debtor at the meeting of creditors andd. [Other provisions as needed]	t of affairs and plan whic	h may be required;	-	ankruptcy;		
6.	By agreement with the debtor(s), the above-disclosed fee does	s not include the following	g service:				
	CI	ERTIFICATION					
this	I certify that the foregoing is a complete statement of any agrebankruptcy proceeding.	eement or arrangement fo	or payment to me for r	epresentation of th	ne debtor(s) in		
1	May 22, 2025	/s/ John P. Wona	ais				
	Date (John P. Wonais Signature of Attorn Wonais Law, LL 11070 S. Wester STE 9 Chicago, IL 6064 3128835422 Faz john@wonaislaw	C n Ave. I3 x: 3122778707				
		Name of law firm					

United States Bankruptcy Court Northern District of Illinois

In re	George H Kouriabalis		Case No.				
		Debtor(s)	Chapter	13			
	VERIFICATION OF CREDITOR MATRIX						
		Number of Creditors:					
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.						
Date:	May 22, 2025	/s/ George H Kouriabalis George H Kouriabalis Signature of Debtor					

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

CFNA Attn: Bankruptcy Po Box 81315 Cleveland, OH 44181

Chase Mortgage Chase Records Center/Attn: Correspondenc Mail Code LA4 5555 700 Kansas Ln Monroe, LA 71203

Citibank PO Box 790040 St Louis, MO 63179

Citibank PO Box 790040 St Louis, MO 63179

CitiBank C/O Manley Deas Kochalski One East Wacker Suite 1250 Chicago, IL 60601

First Midwest Bank One Pierce Place Lower LEvel Itasca, IL 60143

Genesis FS Card Services Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076

Harlem & Milwaukee 7505 N Milwaukee Ave. Niles, IL 60714

Harlem & Milwaukee C/O Sorman Frankel 180 N LaSalle St STE 2700 Chicago, IL 60601 IDOR - Bankruptcy Section PO Box 19035 Chicago, IL 60664

Inland Bank 2805 Butterfield Road Oak Brook, IL 60523

Inland Bank 2805 Butterfield Road Oak Brook, IL 60523

IRS PO BOX 7346 Philadelphia, PA 19101

IRS PO BOX 7346 Philadelphia, PA 19101

Jefferson Capital Systems, LLC Attn: Bankruptcy 200 14th Ave E Sartell, MN 56377

Jpmcb MailCode LA4-7100 700 Kansas Lane Monroe, LA 71203

Lutheran General Hospital 1775 Dempster St Park Ridge, IL 60068

Lvnv Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

Mr. Cooper Attn: Bankruptcy Po Box 619098 Dallas, TX 75261 Santander Consumer USA, Inc Attn: Bankruptcy Po Box 961245 Fort Worth, TX 76161

Specialized Loan Servicing LLC Attn: Bankruptcy P.O. Box 630147 Littleton, CO 80163

Synchrony Bank/AVB Buying Group Attn: Bankruptcy Po Box 965060 Orlando, FL 32896